



2634

PTO/SB/21 (08-00)

MODIFIED

213200.00046 <b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	09/730,603	
	<b>Filing Date</b>	12/07/2000	
	<b>First Named Inventor</b>	Zining WU	
	<b>Group Art Unit</b>	2634	
	<b>Examiner Name</b>	Curtis B. ODOM	
<b>Total Number of Pages in This Submission</b>	6	<b>Attorney Docket Number</b>	MP0065

<b>ENCLOSURES</b> (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form IN DUPLICATE	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Associate Power of Attorney	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement with PTO 1449	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<b>REMARKS</b>	
<input type="checkbox"/> Response to Missing Parts of Reissue Application		

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>	
Firm or Individual name	Andrew J. Bateman Registration No. 45,573
Signature	
Date	12/28/2004

<b>CERTIFICATE OF MAILING</b>			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></span>			
Typed or printed name			
Signature		Date	



# FEE TRANSMITTAL for FY 2005

Effective 10/01/2005. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**180.00**

## Complete if Known

Application Number 09/730,603

Filing Date 12/07/2000

First Named Inventor Zining WU

Examiner Name Curtis B. Odom

Art Unit 2634

Attorney Docket No. MP0065

## METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None☐ Deposit Account:

Deposit Account

50-1710

Account Name

KATTEN MUCHIN ZAVIS ROSENMAN

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge above Deposit Account with any additional fees necessary UNDER 37 CFR 1.16 AND/OR 1.17 to maintain pendency of this application.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity		Small Entity		Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
1001 790	2001 395			Utility filing fee	
1002 350	2002 175			Design filing fee	
1003 550	2003 275			Plant filing fee	
1004 790	2004 395			Reissue filing fee	
1005 160	2005 80			Provisional filing fee	
SUBTOTAL (1)					(\$) <b>0.00</b>

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims		Fee	Fee Paid
Total Claims	- 20** =		
Independent	- 3** =		
Multiple Dependent			

Large Entity		Small Entity		Description
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9			Claims in excess of 20
1201 88	2201 44			Independent claims in excess of 3
1203 300	2203 150			Multiple dependent claim, if not paid
1204 88	2204 44			** Reissue independent claims over original patent
1205 18	2205 9			** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)**0.00**

\*\* or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee \$	Fee Code	Fee \$	Description	Fee Paid
1051 130		2051 65		Surcharge - late filing fee or oath	
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet	
1053 130		1053 130		Non-English specification	
1812 2,520		1812 2,520		For filing a request for <i>ex parte</i> reexamination	
1804 920*		1804 920*		Requesting publication of SIR prior to Examiner action	
1805 1,840*		1805 1,840*		Requesting publication of SIR after Examiner action	
1251 110		2251 55		Extension for reply within first month	
1252 430		2252 215		Extension for reply within second month	
1253 980		2253 490		Extension for reply within third month	
1254 1,530		2254 765		Extension for reply within fourth month	
1255 2,080		2255 1,040		Extension for reply within fifth month	
1401 340		2401 170		Notice of Appeal	
1402 340		2402 170		Filing a brief in support of an appeal	
1403 300		2403 150		Request for oral hearing	
1451 1,510		1451 1,510		Petition to institute a public use proceeding	
1452 110		2452 55		Petition to revive - unavoidable (1.17(l))	
1453 1,370		2453 685		Petition to revive - unintentional (1.17(m))	
1501 1,370		2501 685		Utility issue fee (or reissue)	
1502 490		2502 245		Design issue fee	
1503 660		2503 330		Plant issue fee	
1460 130		1460 130		Petitions to the Director	
1807 50		1807 50		Processing fee - provisional app (1.17(q))	
1806 180		1806 180		Submission of Information Disclosure Stmt	180.00
8021 40		8021 40		Recording each patent assignment per property (times number of properties)	
1809 790		2809 395		Filing a submission after final rejection (1.129(a))	
1814 110		2814 55		Statutory Disclaimer	
1801 790		2801 395		Request for Continued Examination (RCE)	
1802 900		1802 900		Req for expedited examination - Design App	

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**180.00**

## SUBMITTED BY

Name: Andrew J. Bateman

Registration No.: 45,573

Telephone: (202) 625-3547

Signature: \_\_\_\_\_

Date: 12/28/2004



MP0065

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: )  
)  
Zining WU, et al. ) Group Art Unit: 2634  
)  
Application No.: 09/730,603 ) Examiner: Curtis B. ODOM  
)  
Filed: December 7, 2000 ) Confirmation No.: 9241  
)  
For: LDPC DECODER AND METHOD )  
THEREOF )  
) Date: December 28, 2004

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Sir:

In compliance with the duty of disclosure under 37 C.F.R. § 1.56 and in accordance with the practice under 37 C.F.R. §§ 1.97 and 1.98, the Examiner's attention is directed to the documents listed on the enclosed PTO-1449.

In accordance with 37 CFR § 1.97(h), this Information Disclosure Statement is not to be construed as an admission that the information cited is or is considered to be material to patentability as defined in 37 CFR § 1.56(b), nor as an admission that the information constitutes prior art within the meaning of 35 USC §§ 102 and/or 103.

It is respectfully requested that the information listed on the PTO-1449 be considered by the Examiner, and that an initialed copy of the PTO-1449 be returned indicating that such information was considered.

As a non-final Office Action has previously been issued in this application, a Fee Transmittal with a Credit Card Authorization Form is submitted concurrently herewith authorizing payment of the required \$180.00 fee.

Customer No.: 23624

12/29/2004 HNGUYEN1 00000022 09730603

180.00 DP

01 FC:1806



MP0065

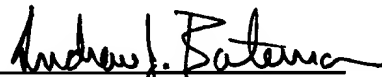
PATENT

Should the Examiner have any questions, Applicants' undersigned attorney is reachable by telephone at (202) 625-3547. The correspondence address of record is provided below.

Respectfully submitted,

KATTEN MUCHIN ZAVIS ROSENMAN

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